Notes from State CIS TA Team consultation with Legal Representatives of the Agency of Human Services Consumer Information and Privacy Committee to Review CIS Confidentiality and Consent Procedures

The Agency of Human Services (AHS) Consumer Information and Privacy Committee (CIPS) is actively developing a new template for an AHS-wide consent form. The template will include a required core set of elements for use with all AHS programs and associated partners, contractors and grantees. Logos can be added. CDD CIS team leaders met with CIPS legal representatives and agreed upon the following information relevant to CIS. This information adds to the content already defined in Appendix B, Confidentiality and Consent, of the Technical Assistance Guidance (TAG) Document for Regional Teams. Teams may create an interim form for use until the AHS consent form is ready for official use (timeframe unknown). Any form developed should consider the Guiding Principles and address the following elements¹.

AHS covered entity = Any employee, grantee, contractor, intern, or volunteer of AHS

AHS/CIPS Guiding Principles

- 1. AHS shares information with the full knowledge and consent, if needed of the individuals served
- 2. AHS treats personal information with the utmost respect and takes appropriate safeguards for privacy
- 3. AHS shares information in order to ensure effective, respectful and timely service for the individuals, youth and families served
- 4. AHS shares information in order to promote the health and safety of all Vermont's families and communities.

The AHS Consent Form shall contain the following information:

- 1. The names of people about whom information may be shared
- 2. A checklist or description of the kinds of information to be shared
- 3. A description of the purpose for which the consent is given
- 4. A list or description of the agencies, offices, departments, contractors, third parties or grantees authorized to receive the information
- 5. A statement that the consent may be revoked at any time except to the extent that the consent has already been acted or relied upon
- 6. The date, event or condition upon which the consent will expire if not revoked earlier
- 7. Signature of individual(s) granting consent, or their parents or guardians and the date
- 8. Signature of the individual explaining the consent process with his or her position, job title and date
- 9. A space to provide individualized instructions
- 10. A statement that the information will not be disclosed further unless another authorization is obtained or unless such disclosure is required by law

AHS/CIPS Consent Process: General Guidelines and Additional Guidance

¹ See Children's Integrated Services Technical Assistance Guide. (9/2007). Appendix B. See: www.cddvt.org/prevention and early intervention/children integrated services.

- Use of the AHS/CIPS consent process and use of a standard consent form is applicable to AHS covered entities, which includes AHS employees, grantees, contractors, interns, volunteers and formal partners. Formal partners include Mental Health and Home Health Agencies. Interim forms developed by CIS teams using the stated AHS guidelines are acceptable.
- HIPAA compliance: Comprehensive Notice of Privacy should be given at time of consent (applies in all instances)
 - Medicaid eligible families receive this from AHS as part of their Medicaid Health Plan
 Information upon application (via DCF, Economic Services, Health Access Eligibility Unit).
 - Partner agencies distribute their own Notices of Privacy as required for AHS covered entities under HIPAA
- AHS covered entities employees, contractors, grantees, volunteers and interns -will ask for written consent to disclose individually identifiable information with non-AHS related service provider
- If an emergency situation requires granting of verbal consent, written consent shall be obtained as soon as possible.
- Members of the client's interdisciplinary team are permitted to use the information among team members to make sure the services they are providing are effective and efficient.

CIS Primary Service Provider and Interdisciplinary Clinical Consultation Teams:

- Consider the informed consent and confidentiality needs of individuals/families together at 4 distinct points (see page 3 - Mapping of CIS general pathways for providing consumer information, ensuring privacy and obtaining consent):
 - Referral and Intake
 - Development of initial individualized plans, including identification of specialized team members needed to accomplish the outcomes of the plan
 - Updates to individualized plans
 - 6-month reviews of individualized plans
- 2. Are composed of qualified CIS professionals (from at least Health, Early Childhood and Family Mental Health, and Part C Early Intervention) who bring together resources that allow for a comprehensive, inclusive lens of very early child development rather than a specific service system lens

All teams need a procedural plan articulating how they will protect confidential information and its use. The plan should consider: a) what individual information will be used for what purposes; b) a process for when there is a need to protect or limit access to information, depending on the extent of the consent given and consumer protections regarding privacy of medical records, e.g., HIPPA and state statutes regarding patient privilege protecting confidential health information²; and c) a process for how specialized teams defined by a client's Individual/One Plan interface with the CIS clinical consultation team to meet and carry out the activities of the plan. In short, guidelines should address WHO accesses WHICH information for WHAT purpose.

² Crowley, J. and Jarris, P. (February 1, 2004). Report on privacy of medical records in Vermont as specified under H. 768, Act 122, \$83 (2004). Department of Banking, Insurance, Securities & Health Care Administration.

Mapping of Children's Integrated Services (CIS) General Pathways for Providing Consumer Information and Ensuring Privacy and Obtaining Informed Consent:

